

HARRIS COUNTY DOMESTIC RELATIONS OFFICE

1310 Prairie, Houston, Texas 77002

Legal Enforcement Division, Suite 700 Phone: 713-755-6757

Family Court Services Division, Suite 620

Phone: 713-755-5706

Alternative Dispute Resolution Division, Suite 780

TO BE COMPLETED BY THE PAYEE (PLEASE PRINT):

Phone: 713-755-2900

Community Supervision Unit, Suite 600

Phone: 713-755-5210

DAVID W. SIMPSON, J.D. Executive Director Board Certified Family Law

www.dro.hctx.net

CREDIT CARD AUTHORIZATION

CAUSE NUMBER:	NAME:	
I HEREBY AUTHORIZE THE DOMES	STIC RELATIONS OFFICE	TO CHARGE MY CREDIT/DEBIT CARD FOR
PAYMENT OF THE BELOW FEE(S) IN	N THE AMOUNT OF: \$	
THE BEES WIEL(S) II	Ψ	(PLEASE INDICATE AMOUNT)
ACCOUNTING		APPLICATION FEE
ATTORNEY CONSULTATION		COMMUNITY SUPERVISION FEE
JUDICIAL WRIT OF WITHHOLDING		LEGAL FEES, CT. COSTS & INTEREST
LETTER (ENFORCEMENT/TERMINATION)		PARENT CONFERENCE
MEDIATION FEE	, i	SOCIAL STUDY INVESTIGATION
ISSUE BASED INVESTIGA	ATION	TRAVEL DEPOSIT
	•	
CREDIT CARD TYPE:	AMERICAN EXPRESS	DISCOVER
	MASTER CARD	VISA
CREDIT CARD NUMBER: EXPIRATION DATE:		
Name on Credit Card:		
CREDIT CARDHOLDER ADDRESS: _	(STREET, CITY, STATE &	Tra Cons)
	(STREET, CITY, STATE &	ZIP CODE)
CREDIT CARDHOLDER CONTACT NU	JMBER:	
AUTHORIZED SIGNATURE:		Date:
Please submit this authorization above or (3) by fax to (713) 755		in person, (2) by mail to the address